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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 10/032,378         | 10/26/2001          | Michael D. Hooven     | HOOV 112               |

Cook, Alex, McFarron, Manzo,  
 Cummings & Mehler, Ltd.  
 Suite 2850  
 200 West Adams Street  
 Chicago, IL 60606



## CONFIRMATION NO. 6155 FORMALITIES LETTER



Date Mailed: 02/01/2002

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

### *Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The statutory basic filing fee is missing.  
*Applicant must submit \$ 740 to complete the basic filing fee for a non-small entity. If appropriate, applicant may make a written assertion of entitlement to small entity status and pay the small entity filing fee (37 CFR 1.27).*
- The oath or declaration is missing.  
*A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.*
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 870.**

03/22/2002 BABRAHA1 00000050 10032378

01 FC:201  
 02 FC:205  
 03 FC:202

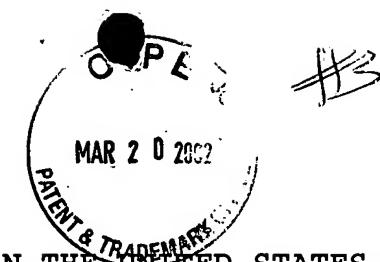
370.00 DP  
 65.00 DP  
 42.00 DP

*A copy of this notice **MUST** be returned with the reply.*

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Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



PATENT  
Attorney Docket No. HOOV 112

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Michael D. Hooven, et al.

Serial No.: 10/032,378

Filed: October 26, 2001

Examiner:

Art Unit: 3739

For: TRANSMURAL ABLATION DEVICE WITH  
INTEGRAL EKG SENSOR

) I hereby certify that this correspondence  
) is being deposited with the United States  
) Postal Service as first class mail in an  
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) ) Commissioner for Patents  
) Washington, D.C. 20231 on:

) ) on March 11, 2002

) ) *Christine A. Barglik*  
Christine A. Barglik

) ) Date: March 11, 2002

) )

Commissioner for Patents  
Washington, D.C. 20231

REQUEST FOR CORRECTED FILING RECEIPT

Dear Sir:

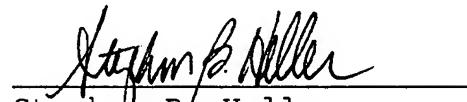
There is an error in the Filing Receipt received for the above-identified patent application.

The Filing Receipt indicates only one Applicant, when, in fact, there are two Applicants. The name of the missing Applicant is Joao Manuel Godinho deQueiroz e Melo.

The Filing Receipt also incorrectly indicates that this application is DIV of 09/844,225, filed April 4, 2001, however, this application is a CIP of 09/844,225, filed April 4, 27, 2001. Correction of the Filing Receipt is respectfully requested.

A copy of the Filing Receipt indicating the requested corrections is attached.

Respectfully submitted,

  
\_\_\_\_\_  
Stephen B. Heller  
Registration No. 30,181

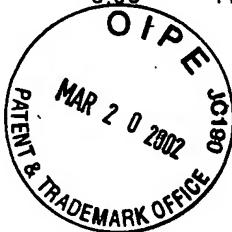
COOK, ALEX, McFARRON, MANZO,  
CUMMINGS & MEHLER, LTD.  
200 West Adams Street - Suite 2850  
Chicago, IL 60606  
(312) 236-8500



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
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 WASHINGTON, D.C. 20231  
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| APPLICATION NUMBER | FILED DATE | GRP ART UNIT | FIL FEE REC'D | ATTY.DOCKET.NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|------------|--------------|---------------|----------------|----------|------------|------------|
| 10/032,378         | 10/26/2001 | 3739         | 0.00          | HOOV 112       | 35       | 9          | 2          |



Cook, Alex, McFarron, Manzo,  
 Cummings & Mehler, Ltd.  
 Suite 2850  
 200 West Adams Street  
 Chicago, IL 60606

CONFIRMATION NO. 6155

## FILING RECEIPT



OC000000007411506

Date Mailed: 02/01/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Michael D. Hooven, Residence Not Provided;

*Joao Manuel Godinho de Queiroz e Melo*

## Domestic Priority data as claimed by applicant

THIS APPLICATION IS A DIV OF 09/844,225 04/27/2001

WHICH IS A CIP OF 09/747,609 12/22/2000

WHICH CLAIMS BENEFIT OF 60/200,072 04/27/2000

## Foreign Applications

If Required, Foreign Filing License Granted 02/01/2002

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No

## Title

Transmural ablation device with integral EKG sensor

## Preliminary Class

*Affidavit*

|            |          |
|------------|----------|
| CASE       | HOOV112  |
| ATTY.      | 6WM 1524 |
| SEARCHED   |          |
| INDEXED    |          |
| MAILED     |          |
| OCT 1 2002 |          |

Missing Parts due 4/01/02



H

MPS

MAR 20 2002

Use a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002, OMB 0651-0031  
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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|  |  |                        |                           |
|--|--|------------------------|---------------------------|
|  |  | Application Number     | 10/032,378                |
|  |  | Filing Date            | October 26, 2001          |
|  |  | First Named Inventor   | Michael D. Hooven, et al. |
|  |  | Group Art Unit         | 3739                      |
|  |  | Examiner Name          |                           |
| Total Number of Pages in This Submission |  | Attorney Docket Number | HOOV 112                  |

### ENCLOSURES (check all that apply)

|   |   |  |   |
|---|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment / <del>Reply</del> - Preliminary<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>- Return Postcard<br>- Request for Corrected Filing Receipt<br>- Copy of Corrected Filing Receipt<br>- Part 2 of Notice To File Missing Parts |   |
|   |   |  | <input type="checkbox"/> Assignment Papers (for an Application)                         |
|   |   |  | <input type="checkbox"/> Drawing(s)   |
|   |   |  | <input type="checkbox"/> Licensing-related Papers                                       |
|   |   |  | <input type="checkbox"/> Petition   |
|   |   |  | <input type="checkbox"/> Petition to Convert to a Provisional Application               |
|   |   |  | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address |
|   |   |  | <input type="checkbox"/> Terminal Disclaimer  |
|   |   |  | <input type="checkbox"/> Request for Refund   |
|   |   |  | <input type="checkbox"/> CD, Number of CD(s) _____                                      |

Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                   |
|-------------------------|-------------------|
| Firm or Individual name | Stephen B. Heller |
| Signature               |                   |
| Date                    | March 11, 2002    |

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: March 11, 2002

|                       |                      |
|-----------------------|----------------------|
| Typed or printed name | Christine A. Barglik |
| Signature             |                      |
| Date                  | March 11, 2002       |

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 477.00)

| Complete if Known    |                           |
|----------------------|---------------------------|
| Application Number   | 10/032,378                |
| Filing Date          | October 26, 2001          |
| First Named Inventor | Michael D. Hooven, et al. |
| Examiner Name        |                           |
| Group Art Unit       | 3739                      |
| Attorney Docket No.  | HOOV 112                  |

| METHOD OF PAYMENT   |               | FEE CALCULATION (continued)  |   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
|---|---------------|--|---|--------------|--------------|-----------------|----------|---------------|---------------|----------|--|-----|-----|-----|--|-------|-----|-----|-----|---|--|-----|-----|-----|-------------------------------|--|-----|-------|-----|--|--|-----|------|-----|---|--|--------------|--------------|----------------|--|----|-----------|------|------|---|----------|-------|-------|--------------------|---|--|-----|-----|-----|--|--|-----|-------|-----|---|--|-----|-------|-----|--|--|-----|-----|-----|----------------------|--|-----|-----|-----|--|--|-----|-----|-----|------------------------------|--|-----|-------|-----|---|--|-----|-----|-----|-------------------------------------|--|-----|-------|-----|--|--|-----|-------|-----|------------------------------------|--|-----|-----|-----|----------------------|--|-----|-----|-----|---------------------|--|-----|-----|-----|-----------------------------------|--|-----|----|-----|--|--|-----|-----|-----|---|--|-----|----|-----|---|--|-----|-----|-----|---|--|-----|-----|-----|--|--|-----|-----|-----|---|--|-----|-----|-----|---|--|---------------------------|--|--|--|--|-----------------------------------|--|--|-------------------------|--|
| <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number <b>50/1039</b></p> <p>Deposit Account Name <b>Cook, Alex, McMarron, Manzo, Cummings &amp; Mehler, Ltd.</b></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p> |               | <p>3. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td>Fee (\$)</td> <td></td> </tr> <tr> <td>105</td> <td>130</td> <td>205</td> <td>65 Surcharge - late filing fee or oath</td> <td>65.00</td> </tr> <tr> <td>127</td> <td>50</td> <td>227</td> <td>25 Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>139</td> <td>130</td> <td>139</td> <td>130 Non-English specification</td> <td></td> </tr> <tr> <td>147</td> <td>2,520</td> <td>147</td> <td>2,520 For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>112</td> <td>920*</td> <td>112</td> <td>920* Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>113</td> <td>1,840*</td> <td>113</td> <td>1,840* Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>115</td> <td>110</td> <td>215</td> <td>55 Extension for reply within first month</td> <td></td> </tr> <tr> <td>116</td> <td>400</td> <td>216</td> <td>200 Extension for reply within second month</td> <td></td> </tr> <tr> <td>117</td> <td>920</td> <td>217</td> <td>460 Extension for reply within third month</td> <td></td> </tr> <tr> <td>118</td> <td>1,440</td> <td>218</td> <td>720 Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>128</td> <td>1,960</td> <td>228</td> <td>980 Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>119</td> <td>320</td> <td>219</td> <td>160 Notice of Appeal</td> <td></td> </tr> <tr> <td>120</td> <td>320</td> <td>220</td> <td>160 Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>121</td> <td>280</td> <td>221</td> <td>140 Request for oral hearing</td> <td></td> </tr> <tr> <td>138</td> <td>1,510</td> <td>138</td> <td>1,510 Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>140</td> <td>110</td> <td>240</td> <td>55 Petition to revive - unavoidable</td> <td></td> </tr> <tr> <td>141</td> <td>1,280</td> <td>241</td> <td>640 Petition to revive - unintentional</td> <td></td> </tr> <tr> <td>142</td> <td>1,280</td> <td>242</td> <td>640 Utility issue fee (or reissue)</td> <td></td> </tr> <tr> <td>143</td> <td>460</td> <td>243</td> <td>230 Design issue fee</td> <td></td> </tr> <tr> <td>144</td> <td>620</td> <td>244</td> <td>310 Plant issue fee</td> <td></td> </tr> <tr> <td>122</td> <td>130</td> <td>122</td> <td>130 Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>123</td> <td>50</td> <td>123</td> <td>50 Processing fee under 37 CFR 1.17(q)</td> <td></td> </tr> <tr> <td>126</td> <td>180</td> <td>126</td> <td>180 Submission of Information Disclosure Stmt</td> <td></td> </tr> <tr> <td>581</td> <td>40</td> <td>581</td> <td>40 Recording each patent assignment per property (times number of properties)</td> <td></td> </tr> <tr> <td>146</td> <td>740</td> <td>246</td> <td>370 Filing a submission after final rejection (37 CFR § 1.129(a))</td> <td></td> </tr> <tr> <td>149</td> <td>740</td> <td>249</td> <td>370 For each additional invention to be examined (37 CFR § 1.129(b))</td> <td></td> </tr> <tr> <td>179</td> <td>740</td> <td>279</td> <td>370 Request for Continued Examination (RCE)</td> <td></td> </tr> <tr> <td>169</td> <td>900</td> <td>169</td> <td>900 Request for expedited examination of a design application</td> <td></td> </tr> <tr> <td colspan="4">Other fee (specify) _____</td> <td></td> </tr> <tr> <td colspan="3">*Reduced by Basic Filing Fee Paid</td> <td colspan="2">SUBTOTAL (3) (\$ 65.00)</td> </tr> </tbody> </table> |   | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code (\$) | Fee Code (\$) | Fee (\$) |  | 105 | 130 | 205 | 65 Surcharge - late filing fee or oath | 65.00 | 127 | 50  | 227 | 25 Surcharge - late provisional filing fee or cover sheet |  | 139 | 130 | 139 | 130 Non-English specification |  | 147 | 2,520 | 147 | 2,520 For filing a request for <i>ex parte</i> reexamination |  | 112 | 920* | 112 | 920* Requesting publication of SIR prior to Examiner action |  | 113          | 1,840*       | 113            | 1,840* Requesting publication of SIR after Examiner action |    | 115       | 110  | 215  | 55 Extension for reply within first month |          | 116   | 400   | 216                | 200 Extension for reply within second month |  | 117 | 920 | 217 | 460 Extension for reply within third month |  | 118 | 1,440 | 218 | 720 Extension for reply within fourth month |  | 128 | 1,960 | 228 | 980 Extension for reply within fifth month |  | 119 | 320 | 219 | 160 Notice of Appeal |  | 120 | 320 | 220 | 160 Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 Design issue fee |  | 144 | 620 | 244 | 310 Plant issue fee |  | 122 | 130 | 122 | 130 Petitions to the Commissioner |  | 123 | 50 | 123 | 50 Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 Filing a submission after final rejection (37 CFR § 1.129(a)) |  | 149 | 740 | 249 | 370 For each additional invention to be examined (37 CFR § 1.129(b)) |  | 179 | 740 | 279 | 370 Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  | SUBTOTAL (3) (\$ 65.00) |  |
| Large Entity  | Small Entity  | Fee Description  | Fee Paid  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Fee Code (\$)   | Fee Code (\$) | Fee (\$)   |   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 105   | 130           | 205  | 65 Surcharge - late filing fee or oath  | 65.00        |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 127   | 50            | 227  | 25 Surcharge - late provisional filing fee or cover sheet                     |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 139   | 130           | 139  | 130 Non-English specification   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 147   | 2,520         | 147  | 2,520 For filing a request for <i>ex parte</i> reexamination                  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 112   | 920*          | 112  | 920* Requesting publication of SIR prior to Examiner action                   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 113   | 1,840*        | 113  | 1,840* Requesting publication of SIR after Examiner action                    |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 115   | 110           | 215  | 55 Extension for reply within first month                                     |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 116   | 400           | 216  | 200 Extension for reply within second month                                   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 117   | 920           | 217  | 460 Extension for reply within third month                                    |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 118   | 1,440         | 218  | 720 Extension for reply within fourth month                                   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 128   | 1,960         | 228  | 980 Extension for reply within fifth month                                    |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 119   | 320           | 219  | 160 Notice of Appeal  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 120   | 320           | 220  | 160 Filing a brief in support of an appeal                                    |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 121   | 280           | 221  | 140 Request for oral hearing  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 138   | 1,510         | 138  | 1,510 Petition to institute a public use proceeding                           |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 140   | 110           | 240  | 55 Petition to revive - unavoidable   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 141   | 1,280         | 241  | 640 Petition to revive - unintentional  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 142   | 1,280         | 242  | 640 Utility issue fee (or reissue)  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 143   | 460           | 243  | 230 Design issue fee  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 144   | 620           | 244  | 310 Plant issue fee   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 122   | 130           | 122  | 130 Petitions to the Commissioner   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 123   | 50            | 123  | 50 Processing fee under 37 CFR 1.17(q)  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 126   | 180           | 126  | 180 Submission of Information Disclosure Stmt                                 |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 581   | 40            | 581  | 40 Recording each patent assignment per property (times number of properties) |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 146   | 740           | 246  | 370 Filing a submission after final rejection (37 CFR § 1.129(a))             |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 149   | 740           | 249  | 370 For each additional invention to be examined (37 CFR § 1.129(b))          |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 179   | 740           | 279  | 370 Request for Continued Examination (RCE)                                   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 169   | 900           | 169  | 900 Request for expedited examination of a design application                 |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Other fee (specify) _____   |               |  |   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| *Reduced by Basic Filing Fee Paid   |               |  | SUBTOTAL (3) (\$ 65.00)   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>   |               | <p>FEE CALCULATION</p> <p>1. BASIC FILING FEE</p> <table border="1"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Fee Code (\$)</td> <td>Fee Code (\$)</td> <td></td> <td></td> </tr> <tr> <td>101</td> <td>740</td> <td>201</td> <td>370 Utility filing fee</td> <td></td> </tr> <tr> <td>106</td> <td>330</td> <td>206</td> <td>165 Design filing fee</td> <td></td> </tr> <tr> <td>107</td> <td>510</td> <td>207</td> <td>255 Plant filing fee</td> <td></td> </tr> <tr> <td>108</td> <td>740</td> <td>208</td> <td>370 Reissue filing fee</td> <td></td> </tr> <tr> <td>114</td> <td>160</td> <td>214</td> <td>80 Provisional filing fee</td> <td></td> </tr> </tbody> </table> <p><b>SUBTOTAL (1) (\$ 370.00)</b></p> <p>2. EXTRA CLAIM FEES</p> <table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>18</td> <td>-20** = 0</td> <td>0.00</td> <td>0.00</td> </tr> <tr> <td>4</td> <td>-3** = 1</td> <td>42.00</td> <td>42.00</td> </tr> <tr> <td colspan="4">Multiple Dependent</td> </tr> </tbody> </table> <p><b>SUBTOTAL (2) (\$ 42.00)</b></p>   |   | Large Entity | Small Entity | Fee Description | Fee Paid | Fee Code (\$) | Fee Code (\$) |          |  | 101 | 740 | 201 | 370 Utility filing fee                 |       | 106 | 330 | 206 | 165 Design filing fee                                     |  | 107 | 510 | 207 | 255 Plant filing fee          |  | 108 | 740   | 208 | 370 Reissue filing fee                                       |  | 114 | 160  | 214 | 80 Provisional filing fee                                   |  | Total Claims | Extra Claims | Fee from below | Fee Paid   | 18 | -20** = 0 | 0.00 | 0.00 | 4   | -3** = 1 | 42.00 | 42.00 | Multiple Dependent |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Large Entity  | Small Entity  | Fee Description  | Fee Paid  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Fee Code (\$)   | Fee Code (\$) |  |   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 101   | 740           | 201  | 370 Utility filing fee  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 106   | 330           | 206  | 165 Design filing fee   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 107   | 510           | 207  | 255 Plant filing fee  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 108   | 740           | 208  | 370 Reissue filing fee  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 114   | 160           | 214  | 80 Provisional filing fee   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Total Claims  | Extra Claims  | Fee from below   | Fee Paid  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 18  | -20** = 0     | 0.00   | 0.00  |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| 4   | -3** = 1      | 42.00  | 42.00   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |
| Multiple Dependent  |               |  |   |              |              |                 |          |               |               |          |  |     |     |     |  |       |     |     |     |   |  |     |     |     |                               |  |     |       |     |  |  |     |      |     |   |  |              |              |                |  |    |           |      |      |   |          |       |       |                    |   |  |     |     |     |  |  |     |       |     |   |  |     |       |     |  |  |     |     |     |                      |  |     |     |     |  |  |     |     |     |                              |  |     |       |     |   |  |     |     |     |                                     |  |     |       |     |  |  |     |       |     |                                    |  |     |     |     |                      |  |     |     |     |                     |  |     |     |     |                                   |  |     |    |     |  |  |     |     |     |   |  |     |    |     |   |  |     |     |     |   |  |     |     |     |  |  |     |     |     |   |  |     |     |     |   |  |                           |  |  |  |  |                                   |  |  |                         |  |

\*\*or number previously paid, if greater; For Reissues, see above

| SUBMITTED BY      |                          | Complete (if applicable)          |        |                          |
|-------------------|--------------------------|-----------------------------------|--------|--------------------------|
| Name (Print/Type) | Stephen B. Heller        | Registration No. (Attorney/Agent) | 30,181 | Telephone (312) 236-8500 |
| Signature         | <i>Stephen B. Heller</i> | Date March 11, 2002               |        |                          |

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